



The Department of Health and Mental Hygiene Behavioral Health Administration

The Office of Adult and Specialized Behavioral Health Services

Mission Statement

The mission of the Office of Adult and Specialized Behavioral Health Services is to ensure that a comprehensive system of behavioral health services and supports are available and accessible to emerging adults and adults throughout the life span. To meet its mission, the Office oversees the statewide planning, development, administration, and monitoring of community and residential based behavioral health treatment and recovery services for adults, transition age youth, older adults, and special populations.

Adult Services Team

The Adult Services team ensures that a comprehensive system of mental health services and supports are available and accessible for emerging adults and adults from age 18 throughout the life span. The team oversees the statewide planning, design, development, implementation and monitoring of community-based mental health programs and services for adults, transition age youth, and older adults. In addition, the team formulates policy, protocols, regulations and practice guidelines to support systems transformation for improved individual consumer outcomes, promotes evidence-based, consumer directed and recovery-oriented rehabilitation, treatment and supports that have demonstrated effectiveness and are responsive to individual needs and preferences.

Services and Initiatives

Services are provided based on eligibility and medical necessity criteria established for that level of service through the Public Behavioral Health System.

- **Psychiatric inpatient care:** Psychiatric inpatient care is a hospital-based service that provides intensive, psychiatric treatment to individuals experiencing severe psychiatric symptoms or behaviors that place them at risk of harming themselves or others. The inpatient service may include psychiatric and clinical evaluation, medication administration and management, individual and family counseling, group therapy, medical and nursing supervision and interventions, psycho-education, and aftercare services.
- **Psychiatric partial hospitalization:** Partial hospitalization is an outpatient, short-term, intensive, psychiatric treatment service that parallels the intensity of services provided in a

hospital, including medical and nursing supervision and interventions. This level of service is a benefit for Medicaid-eligible children, adolescents, and adults.

- **Respite:** Respite services are provided on a short-term basis in the individual's home or in an approved community-based setting and are designed to support the individual in remaining in his or her home by providing temporary relief to the individual's care-givers.
- **Outpatient Mental Health Center or Individual Mental Health Practitioner:**
Outpatient psychiatric treatment services may include psychiatric or clinical assessment and evaluation, individual therapy, group therapy, family therapy, family psycho-education, or medication management. This service is provided by approved Outpatient Mental Health Centers (OMHCs) or by individual mental health professionals who are authorized and/or licensed by the appropriate practice boards.
- **Psychiatric Rehabilitation Program (PRP):** PRP services are designed for individuals with severe and persistent mental illness (SPMI) to facilitate recovery and develop or restore independent living and social skills, including the ability to make decisions regarding: self-care, illness management, life, and community participation; and promote the use of resources to integrate the individual into the community. Services may be provided in an on-site facility, or in a setting most conducive to promoting the participation of the individual in community life.
- **Residential Rehabilitation Program (RRP):** RRP services are designed for individuals with severe and persistent mental illness (SPMI) who require extensive rehabilitation and support in a structured living environment.
- **Assertive Community Treatment/Mobile Treatment:** Assertive Community Treatment/Mobile Treatment is an intensive, community-based service which provides assertive outreach, treatment, rehabilitation, and support to individuals with severe and persistent mental illness (SPMI) who may be without a home or for whom more traditional forms of outpatient treatment have been ineffective. Services are provided by a mobile, multidisciplinary team in the individual's natural environment.
- **Case Management:** Case management services are provided in the home or community in order to assist individuals in gaining access to the full range of mental health services, as well as to any additional needed medical, social, financial assistance or benefits, counseling, educational, housing and other supportive services.
- **Supported Living:** Supported living services provide off-site rehabilitation and support for individuals with severe and persistent mental illness (SPMI) who are able to live in independent housing of their choice with flexible, individualized supports.
- **Supported Employment:** Supported employment (SE) services provide job development and placement, job coaching, and ongoing employment support to individuals with serious mental illness (SMI) or emotional disturbance for whom competitive employment has not occurred, has been interrupted, or has been intermittent. These individualized services are provided to

enable eligible individuals to choose, obtain, maintain, or advance within independent competitive employment, within a community-integrated work environment, consistent with their interests, preferences, and skills. This level of service is available for individuals ages 16 and older.

- **Residential Crisis:** Residential Crisis services are short-term, intensive mental health and support services provided in a community-based, non-hospital, residential setting which are designed to prevent a psychiatric inpatient admission, to provide an alternative to psychiatric inpatient admission, or to shorten the length of inpatient stay.
- **Mental Health-Related Laboratory Services:** Mental Health-Related Laboratory services include medically necessary tests and procedures performed by approved laboratories with a valid Medicaid provider number related to the psychiatric treatment rendered by psychiatrists in the PBHS to Medicaid eligible consumers.

Access to Services

These services are provided based on service eligibility and corresponding medical necessity criteria. Further information is available through the Administrative Services Organization (ASO) via a toll-free number, 1-800-888-1965. The ASO can be accessed 24 hours a day, 7 days a week.

Adult Services

Behavioral Health Homes: Behavioral Health Homes are for individuals with behavioral health needs who are at high risk for additional chronic health conditions, including those with serious mental illness, serious emotional disorders, and opioid substance use disorders. The program offers participants enhanced care coordination services from providers with whom they regularly receive services, including psychiatric rehabilitation programs, mobile treatment service providers, and opioid treatment programs. This is a community-based approach, not a residential program. Health Homes enhance person-centered care by empowering participants to manage and prevent chronic conditions in order to improve health outcomes, while reducing avoidable hospital encounters. Health Homes provide six core services, as follows: Comprehensive Care Management, Comprehensive Transitional Care, Care Coordination, Individual and Family Support, Health Promotion, and Referral to Community and Social Support. To learn more about the behavioral health homes, please go to: <http://dhmh.healthhomes@maryland.gov>

Traumatic Brain Injury (TBI): BHA has leadership responsibilities within the State of Maryland related to planning and coordinating services for individuals with TBI. BHA staffs the Maryland Traumatic Brain Injury Advisory Board, which reports annually to the Governor, the General Assembly and several State Departments regarding the needs of Marylanders with TBI. BHA also provides statewide training to human service workers on topics related to brain injury, person centered planning, and mental health first aid. The Home and Community-Based Waiver (1915c) for Individuals with Brain Injury is also administered by this office. The program offers specialized community based brain injury supports to individuals who have significant neurobehavioral issues related to a brain injury sustained after the age of 17 who meet the

medical, technical and financial eligibility criteria for the program. For more information please call our general number 410-402-8476. For general brain injury information and referrals, please contact the Brain Injury Association of Maryland 410-448-2924

Ticket to Work Program: The Ticket to Work Program helps people who receive Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI) to return to meaningful work, maintain employment, and to pursue ongoing career advancement. The program is free and voluntary. The Maryland Mental Health Ticket program is a statewide administrative Employment Structure, sponsored by the Behavioral Health Administration, which connects selected supported employment programs and the Core Service Agency (CSAs) within which the supported employment programs operate into a single EN consortium. More information is available at: <http://harfordmentalhealth.org/ticket-to-work>.

Evidence-Based Practice (EBP): EBP refers to a specific practice or service that consists of a set of standardized, replicable interventions for which rigorous scientific research exists to demonstrate the effectiveness of the interventions when implemented as designed in achieving meaningful, positive outcomes for individuals who have received the service. The successful implementation of EBP program fidelity is measured by a scale which assesses the degree to which the services adhere to the core principles and essential program elements of the practice which have been shown by research to be critical to the effectiveness of the service. EBP programs that have been rated high in fidelity on an empirically-validated fidelity scale by trained fidelity evaluators have been shown to achieve superior outcomes relative to those programs that have been rated low in fidelity. Annual or biennial fidelity assessments are performed by trained BHA fidelity evaluators to ensure that programs meet established fidelity standards. In addition, training, technical assistance and consultation is provided to interested programs. The Adult Services team promotes, monitors, and evaluates the development and implementation of EBP programs and services in partnership with the University of Maryland School of Medicine, Department of Psychiatry, Evidence-Based Practice Center. These include:

- ***Assertive Community Treatment (ACT):*** ACT is an intensive community based service which provides assertive outreach, treatment, rehabilitation, and support to individuals with a severe and persistent mental illness (SPMI), who may not have a home, and for whom more traditional forms of outpatient treatment may not have been effective. Services are provided by a mobile multidisciplinary team.
- ***Family Psycho-education (FPE):*** FPE is an approach for partnering with individuals and families to treat serious mental illnesses. FPE practitioners develop a working alliance with individuals and families in the recovery process by providing information on mental illness; assisting helps to build social supports; and enhancing problem solving, communications and coping skills.
- ***Support Employment (SE):*** Supported employment services provide job development and placement, job coaching, and ongoing support to individuals with a serious mental illness (SMI) or a serious emotional disorder for whom competitive employment has not occurred, has been interrupted, or has been intermittent. Individualized services are provided to assist

with choosing, obtaining, maintaining, or advancing in independent, competitive, community-integrated work that aligns with the interests, preferences, and skills of the individual. For more information about Evidence-based practices visit:

<http://mentalhealth.samhsa.gov/cmhs/community/support/toolkits/about.asp>

Housing: BHA, working in partnership with DHMH sponsored “Capital Bond Program,” Department of Housing and Community Development (DHCD) and local Public Housing Authorities works to develop additional affordable housing choices with a focus on Supported Housing and develops programs throughout the State (e.g. “Bridge Subsidy”) to promote additional affordable housing choices. Supported housing programs allow individuals with SMI to live in their own subsidized residences, become primary lease holders, and have access to services from the PBHS. Services are encouraged but are not required; they are optional to the individual.

BHA is a member of Maryland Partnership for Affordable Housing (MPAH) along with other DHMH members (Developmental Disabilities and Money Follows the Person), the MD Department of Disabilities (MDOD) and the DHCD to apply for Federal HUD affordable housing opportunities. The development of HUD Section 811 housing is occurring across the State and the Weinberg Foundation has also a partnered with MDOD in the creation of affordable housing to serve individuals served by DHMH with severe mental health and other disabilities.

Older Adults Behavioral Health:

- **The PASRR Program (Pre-Admission Screening and Resident Review)** is a federal program governed by the Centers for Medicare and Medicaid Services. This program screens individuals seeking nursing facility care for a history of mental illness and identifies the most appropriate and least restrictive services that will meet the individual’s needs. The required evaluations are conducted by Adult Evaluation and Referral Services (AERS) professionals at the local health departments and approved by the Office of Adult Services.
- **Outreach and specialized services to support older adults with behavioral health issues:** BHA funds specialized programs and resources through state grants to certain jurisdictions to support the behavioral health needs of older adults. These programs may include outreach, education, engagement, home-based treatment, or specialized older adult RRP or behavioral health assisted living services.
- **Transition Age Youth (TAY) Services:** Transition planning services assist young people (emerging adults) with mental illnesses and emotional disabilities as they prepare for adult life. Transition-age services and supports are available to youth beginning at age 16. Services and supports are designed to prepare and facilitate achievement of goals related to relevant transition domains, such as employment, career, and educational opportunities, living situations, personal effectiveness, well-being, community contribution and life functioning. Services integrate traditional and nontraditional

supports in developmentally appropriate and effective youth-guided local systems of care with the system goal of expansion of the evidence informed service provision throughout the state.

Early Interventions/First Episode Psychosis Programs: The Department of Health and Mental Hygiene, Behavioral Health Administration, the University of Maryland, School of Medicine, the University of Maryland Medical System, and the University of Maryland Baltimore Campus have collaborated to offer specialized programs with expertise in the early identification, evaluation, and comprehensive psychiatric treatment of adolescents and young adults at risk for, or in the early stages of, a mental illness with psychosis. The programs use an integrated approach to address the health and mental health needs of young adults, including providing support for co-occurring substance use disorders, and metabolic and other co-occurring medical conditions. These programs are committed to reducing disability by equipping individuals at risk and their families with tools to manage their illness, move successfully through the developmental stages of growth, and establish a life of their choosing. For more information about the Maryland Early Intervention Programs (EIP), please visit www.MarylandEIP.com or call (877) 277-MEIP (6347).

Access to Services:

Additional information about services under these initiatives is available at the Core Service Agency for your county. A complete directory with contact information can be obtained on line at www.marylandbehavioralhealth.org.

Treatment and Recovery Services Team

The Treatment and Recovery Services Team is responsible for the development and monitoring of effective behavioral health treatment and substance abuse recovery services and the implementation of evidence-based practices and standards statewide. Our primary goals are to maintain an integrated service delivery system, increase access to appropriate clinical and recovery support services, improve treatment outcomes, and to provide education on, and increase the public's awareness of, the risks associated with substance use. The unit also allocates and monitors the use of federal and state fiscal resources, provides training and technical assistance to jurisdictions and service providers, and monitors the achievement of outcome and performance measures. For more information please contact the program director, Deirdre Davis at 410 402 8620 or deirdre.davis@maryland.gov

Clinical Services

Services are offered through a continuum of treatment modalities/levels of care that promote public health and safety of patients, families, and communities. The modalities are community and jail-based and consist of Intensive Outpatient, Outpatient, Inpatient and Residential treatment (see Halfway House), DWI/DUI education, Detoxification services, and Opioid Maintenance Therapy (uses pharmacological (medication assisted) interventions, to provide treatment and recovery support to opioid-addicted patients).

Halfway House: Clinically managed, low-intensity, structured residential care with at least 5 hours a week of on-site treatment that is delivered by a certified or licensed counselor/therapist. Individuals must meet ASAM (American Society of Addiction Medicine) criteria for admission. This housing type is considered level of care 111.1 and is monitored by the Unit of Quality Assurance: Compliance section.

Recovery Support Services

Maryland RecoveryNet: Develops partnerships with service providers statewide and funds access to clinical and recovery support services for individuals with substance use/co-occurring disorders treatment and recovery support needs. All Maryland RecoveryNet service recipients receive Care Coordination through which they can access a menu of services which includes Maryland RecoveryNet funding for Halfway House and Recovery Housing, Transportation, Employment services, Vital Records, Medical and Dental services, and other unmet needs as expressed by the individual and/or identified by the Care Coordinator.

Supportive Transitional Housing (Recovery Housing): A Sober living facility that provides supportive housing to individuals that do not require the higher intensity of a halfway house setting. Individuals may be early in recovery, transitioning from homelessness or have other living arrangements that do not offer safe and recovery oriented environments. This housing type is not monitored or regulated. Recovery housing providers are encouraged to become a member of M-SARR (Maryland State Association of Recovery Residences). Only recovery housing providers who are members of M-SARR are eligible for reimbursement under the Maryland RecoveryNet. For additional information on M-SARR call 410-522-2232 or visit <http://www.m-rocc.org/>

Continuing Care: Individuals who no longer meet ASAM criteria for a more intensive level of care can be enrolled in Continuing Care affording them the opportunity to maintain an ongoing relationship with their substance use treatment provider. Key components of this program include flexibility in frequency of contact between clinician and patient, phone-based risk assessment (recovery check-up) and counseling, face-to-face sessions, transfer back to a higher level of care if warranted, and referral for support services (e.g., housing, employment, access to medical care, etc.) as needed.

Care Coordination: An activity that is designed to improve recovery outcomes for individuals identified as at high risk for relapse. Care Coordinators assist clients with gaining access to community/faith-based medical, behavioral, social and other recovery support services appropriate to their needs and includes recovery assessment, care planning, referral/linkage, ongoing monitoring, and follow-up. For additional information contact the State Care Coordination Program Manager Leslie Woolford at 410- 402-8673.

Recovery Community Centers (RCC): Recovery Community is a term used to convey the sense of shared identity and mutual support of persons who are part of the social world of individuals in recovery. BHA now has twenty funded Recovery Community Centers. These centers are designed to be a safe haven for those in recovery to convene, and is also a place where interested persons in recovery can obtain a multitude of services to support a healthy and recovering lifestyle. Services

include: 12-step support meetings, Meditation sessions, Care Coordination/enrollment into MD RecoveryNet, Peer Support group, Recovery Coaching, Computer access, and discussions on HIV, Mental Health, and tobacco use. Some RCCs serve as an access point linking individuals needing somatic and/or behavioral health care and/or insurance. For additional information contact Patricia Konyeaso at 410- 402-8595.

Peer Support/Recovery Coaching: Services involve the development of a supportive peer relationship with individuals that will assist them in developing healthy living skills, and will aid in the acquisition and enhancement of recovery self-management skills. Peer services are facilitated in consideration of the four domains of Advocacy, Recovery and Wellness, Mentoring and Education, and Ethical Responsibility, which are performed by a Peer Recovery Specialist (CPRS) certified by the Maryland Addictions Professional Certification Board. Peer activities may include but are not limited to accompanying individuals to appointments/meetings, leisure activities, providing assistance with completing paperwork for social and other support services, providing assistance/preparation for employment (shopping for work related clothing, coaching to prepare for an interview). For additional information contact Leslie Woolford at 410-402-8673.

Access to Services:

Additional information about services is available from the Local Addiction Authorities for your county. A complete directory with contact information can be obtained online at <http://adaa.dhmdh.maryland.gov/SitePages/ADAA-ResourceDirectory.aspx>.

Specialized Behavioral Health Services Team
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The Specialized Behavioral Health Services Team is responsible for development, monitoring and coordination of services for individuals 18 years of age and throughout the life span with mental illness or co-occurring substance use disorders with special needs. Populations that fall under Specialized Behavioral Health include individuals who are homeless, deaf or hard of hearing, incarcerated in local detention centers and/or trauma survivors. In addition, the unit oversees specialized programs developed with state, federal, and local funding targeted to special populations.

Maryland Community Criminal Justice Treatment Program (MCCJTP): MCCJTP is operational in 22 of 24 jurisdictions assisting local detention centers in meeting the comprehensive needs of justice-involved individuals. In collaboration with the Core Service Agencies, the program delivers both clinical treatment and case management services reaching an average of 10,000 individuals annually. Each participating jurisdiction works in partnership with experts from agencies that provide mental health, alcohol and substance use, case management, and legal counsel services, as well as representatives from the detention center, judiciary, parole and probation, law enforcement, social services, consumer advocates, and the community. For more information please contact the program coordinator, Angela McCauley at 410-402-8482 or angela.mccauley@maryland.gov.

Datalink: A partnership between the Department of Health and Mental Hygiene/Behavioral Health Administration, DHMH's Office of Health Services, the Department of Public Safety and Correctional Services (DPSCS), the Administrative Services Organization (ValueOptions MD), the Core Services Agencies and the local detention centers. The purpose of Datalink is to promote the continuity of treatment for individuals with serious mental illness who are detained in the detention center. ValueOptions, the ASO for the Behavioral Health Administration (BHA), receives a daily file from DPSCS of all individuals that have been: detained and processed at local detention centers in the past 24 hour period; incarcerated at one of the State correctional facilities; or remanded to the Department of Parole and Probation. The data is compared against Medicaid eligibility data, utilizing agreed upon data points to identify a detainee as a "match." Once a match is identified, the process looks for mental health authorizations and paid Medicaid pharmacy claims within the past calendar year. This information is then electronically returned to DPSCS and uploaded into their Electronic Health Record system where it can be viewed by authorized detention center medical staff. Detention center medical staff utilizes this data to address the detainees medical and mental health needs. Simultaneously, the data is also shared with the local Core Services Agency who may assist in providing coordinated care for the individual while detained and upon release. For more information, contact Marian Bland at (410) 402-8461 or marian.bland@maryland.gov.

Crisis Intervention Training (CIT): A training program developed to help police confront behavioral health emergencies in which a person poses, or appears to pose, a danger to themselves or others. The local Core Service Agencies receive funding from BHA to develop teams in collaboration with local law enforcement in their communities using best practices. In addition to training, CIT is built on strong partnership between law enforcement, behavioral health provider agencies, and individuals and families affected by behavioral health conditions. The ultimate goal of CIT is diversion from the criminal justice system. For more information, contact Marian Bland at (410) 402 – 8461 or marian.bland@maryland.gov.

Crisis Response Services: These services are critical to addressing crisis in the community in a coherent and coordinated manner. Crisis response systems collaborate and partner with local law enforcement agencies to ensure those with behavioral health needs receive appropriate levels of treatment rather than incarceration in local jails and/or prevent other negative and traumatic outcomes. Maryland's Crisis Response Continuum includes 24/7 clinical crisis phone line/hotline, walk-in crisis services, mobile crisis teams, police-based crisis intervention teams, urgent care clinics, emergency department psychiatric services, 23 hour holding bed, crisis residential beds, Critical Incident Stress Management (CISM) teams, case management, and court-based diversion. For more information, contact Marian Bland at (410) 402 – 8461 or marian.bland@maryland.gov.

Continuum of Care Programs: The Continuum of Care Programs provides tenant and sponsor-based rental assistance to homeless individuals and families with an adult member who has a serious mental illness or co-occurring substance use disorder in 20 jurisdictions in Maryland. Fifty percent of the units subsidized are targeted to individuals recently released from incarceration and were homeless prior to incarceration and are currently homeless. Individuals and families are also provided with supportive services through Public Behavioral Health providers and other state or local agencies. For more information please contact the program director, Keenan Jones at 410-402-8350 or keenan.jones@maryland.gov.

Trauma, Addictions, Mental Health and Recovery Program (TAMAR): TAMAR, the State's trauma education project, has existed for more than 12 years providing services to individuals 18 and older who are detained in participating detention centers. Individuals with a history of abuse, a recent treatment history for a mental health condition or treatment for an alcohol or drug disorder are eligible for participation. The TAMAR education program in nine detention centers and one state hospital reaches nearly 500 consumers annually. In addition to treatment in the detention center, four of the eight jurisdictions provide trauma treatment to inmates re-entering the community. For more information please contact the program director, Darren McGregor at 410-402-8467 or darren.mcgregor@maryland.gov or Angela McCauley at 410-402-8482 or angela.mccauley@maryland.gov.

Projects for Assistance in Transition from Homelessness (PATH): Maryland's Projects for Assistance in Transition from Homelessness (PATH) program was developed in 1991. PATH is a federal formula grant from the Substance Abuse Mental Health Services Administration (SAMSHA) Center for Mental Health Services. PATH provides flexible community and detention center-based services to individuals who are homeless and have a mental illness. Services include screening and assessments, rehabilitation and habilitation services, case management linkage to housing, referrals to primary health and mental health, employment and education services, housing assistance, security deposits, one-time only funds to prevent eviction, SOAR outreach and assistance applying for SSI/SSDI benefits, and other services. PATH services are funded in Baltimore City and all counties in Maryland. For more information please contact the program director, Keenan Jones at 410-402-8353 or keenan.jones@maryland.gov.

Deaf and Hard of Hearing Services: The unit oversees services and contracts that offer Public Behavioral Health Services to consumers who have a mental illness, co-occurring substance use disorders, or substance use disorders. The office also provides technical assistance to CSAs, providers, consumers and advocates and participates on several committees and advisory boards related to enhancing services to consumers who are deaf and hard of hearing and deaf-blind.

Services to individuals who are deaf and hard of hearing are provided either through the Public Behavioral Health System based on the consumer meeting medical necessity criteria for Public Behavioral Health Services or through specialized programs funded through state grants to local Core Service Agencies, health departments, or a designated provider. Limited funding is also available through the Core Service Agencies and health departments to pay the cost for an interpreter in order for PBHS eligible consumers to access outpatient behavioral health services. Approval for interpreting services funding may be accessed through the Core Service Agency (mental health or co-occurring) or the local health department (substance use) prior to service delivery. The Behavioral Health Administration (BHA) also operates a separate unit at Springfield Hospital Center which provides a full array of inpatient services to adults who are deaf and hard of hearing. The unit employs a complement of deaf behavioral health professionals who are fluent in American Sign Language or other visual communication services.

How to access deaf services?

Medicaid funded services for individuals who have a mental illness or co-occurring substance use disorder may be accessed through the ASO at 1-800-888-1965 or www.maryland.valueoptions.com

Specialized Deaf Programs (through State or Federal funding)

- **Arundel Lodge** is a nonprofit agency that provides outpatient behavioral health services with licensed mental health professionals proficient in American Sign Language, residential rehabilitation services, and psychiatric rehabilitation services in Anne Arundel County. This agency also provides outpatient mental health services for the Eastern Shore Counties through a tele-mental health project with Mid-Shore Mental Health Systems, Inc.
- **The Community Support Services for the Deaf** is a nonprofit organization that provides services for deaf consumers who have a mental illness or co-occurring substance use disorders. This program provides support for consumers using signing staff in the psychiatric rehabilitation program, residential programs, a senior day program and onsite psychotherapeutic services.
- **People Encouraging People, Inc.**, is a nonprofit agency that provides that operates a specialized deaf program. Outpatient mental health treatment, psychiatric rehabilitation, residential rehabilitation, and supported employment services are provided by signing staff through this grant in Baltimore City.
- **Family Services Foundation** is a nonprofit agency that provides outpatient mental health treatment services through a licensed mental health professional proficient in American Sign Language, psychiatric rehabilitation services, and residential rehabilitation services.
- **University of Maryland, Deaf Addiction Services at Maryland (DASAM)** is a nonprofit agency that provides statewide addiction treatment services to adults who are deaf or hard of hearing.

Behavioral Health Disaster Services: The Office has the responsibility for coordinating the delivery of community behavioral health services in response to natural and man-made disasters in partnership with the local Core Service Agencies. The goal is to establish a synchronized, comprehensive, integrated, inclusive and coordinated plan to respond to environmental and man-made disasters in Maryland. The purpose of planning is to minimize the adverse effects of traumatic events affecting all individuals in Maryland communities.

The Plan identifies necessary administrative and clinical activities, supports, and resources that can be mobilized quickly when a disaster occurs. It is well recognized that disaster services require rapid, integrated, flexible, collegial and collaborative responses. To that end, the Plan concentrates on four areas of activities: (1) Mitigation; (2) Preparedness; (3) Response; and (4) Recovery. For each activity the responsibilities of the BHA Executive Director, BHA Facilities

Directors, Core Service Agencies (CSA), and local health departments (LHD) are addressed. Where appropriate, other partner responsibilities are delineated. For more information please contact the program director, Darren McGregor at 410- 402- 8467 or darren.mcgregor@maryland.gov or Marian Bland at 410-402-8461 or marian.bland@maryland.gov.

Chrysalis House Healthy Start Program: Chrysalis House Healthy Start is a program developed for pregnant women who are incarcerated or at risk of incarceration in local detention centers and the Maryland Correctional Institute for Women (MCIW). The Chrysalis House Healthy Start Program is funded with State dollars and a small PATH grant. This holistic program aims to provide appropriate treatment and mother/child intervention to women with mental health, substance use, and trauma related disorders. The program provides services at a 16-bed residential/transitional facility during the pregnancy and for up to one year post delivery. The Office of Adult and Specialized Behavioral Health Services continues to provide oversight and technical assistance for this program. For more information please contact the program director, Darren McGregor at 410-402-8467 or darren.mcgregor@maryland.gov.

SSI/SSDI, Outreach, Access and Recovery (SOAR) Initiative: SOAR: Maryland's SOAR (SSI/SSDI Outreach, Access, and Recovery) Initiative aims to increase access to the disability income benefit programs administered by the Social Security Administration for eligible adults who are homeless or who are at risk of homelessness and have a mental illness and/or a co-occurring substance use disorder. Currently, there are active SOAR programs in the following jurisdictions: Allegany, Anne Arundel, Baltimore, Carroll, Cecil, Charles, Frederick, Garrett, Harford, Howard, Montgomery, Prince George's, St. Mary's, Somerset, Washington, Worcester, and Wicomico counties, and Baltimore City. For more information about the Initiative, including contact information for the SOAR Local Leads, please contact the program director, Caroline Bolas at 410-402-8344 or caroline.bolas@maryland.gov.

Homeless Identification Project: The project is funded through the Alcohol Tax Initiative and is available in Baltimore City and all counties throughout Maryland, and is administered through lead Core Service Agencies of Baltimore City, Anne Arundel, Frederick, Howard, Montgomery, Washington and Worcester Counties. The purpose of the project is to provide funds to pay the cost of a Maryland identification card and/or birth certificate in order for individuals who have a mental illness or co-occurring substance use disorders and are homeless or imminent risk of homelessness to access community resources.

This project also provides funds for IDs for minor children in the care of a qualifying adult, that meets the homeless and disability criteria and unaccompanied homeless youth ages 14 and over. By having these two very important documents, access to housing, healthcare, entitlements and other resources in the community can be gained. In addition to IDs and birth certificates, five SOAR dedicated case management positions are funded. The SOAR case management positions are a very important asset to the Homeless ID Project because these positions also assist individuals with accessing financial benefits allowing them to gain stability in the community. For more information please contact the project coordinator, Sherry Boyd at 410-402- 8354 or sherry.boyd@maryland.gov

Women's Services Team

The Women's Services Team develops and coordinates the administration's efforts to provide evidence-based services for substance use treatment and recovery for Women and their families. The team manages contracts for substance use residential treatment services for pregnant women and women with dependent children, as well as provide technical assistance and training to Local Health Departments and treatment providers. This team also collaborates with federal, state and local agencies/organizations to provide comprehensive services for women.

The team oversees several legislatively mandated initiatives which include: **Senate Bill 512** (1997) which focuses on developing and managing appropriate services, including treatment for drug exposed newborn and ensuring that the substance using mother receives assessment and referral to treatment.

House Bill 7 (2000) is a demonstration project in Baltimore City and Prince George's County through collaboration with Department of Human Resources/Social Services Administration which ensures that women and/or their family members who currently have an open Child Protective Services case (CPS) receive assessment and referral to treatment.

House Bill 1160 (2000) is the Substance Abuse Treatment Services (SATS) Initiative established as a result of the Welfare Innovation Act of 2000. It provides fund transfers from Department of Human Resources/Family Investment Administration - (DHR/FIA) to the (DHMH/BHA) Department of Health and Mental Hygiene/Behavioral Health Administration (BHA) to fund 61 Addiction Specialist in the local Departments of Social Services offices in every jurisdiction in the state and for one Coordinator of Programs position at BHA. This initiative is responsible for determining whether applicants and recipients of Temporary Cash Assistance (TCA) and certain Food Stamp Program applicants and recipients need substance abuse referral and treatment.

For More Information

Behavioral Health Administration
Office of Adult and Specialized Behavioral Health Services
Main Office: 410-402-8300

Director: Marian Bland
Adult Services Team: Steve Reeder
Specialized Behavioral Health Services Team: Marian Bland and Darren McGregor
Treatment and Recovery Team: Deirdre Davis
Women Services Team: Suzette Tucker